

Senate Bill 304

By: Senators Mullis of the 53rd and Thomas of the 54th

A BILL TO BE ENTITLED  
AN ACT

To amend Title 31 of the Official Code of Georgia Annotated, relating to health, so as to provide for requirements for the treatment of patients with end stage renal disease; to provide a short title; to provide for definitions; to provide requirements for registered nurses who provide treatment to patients with end stage renal disease; to provide for training requirements for registered nurses who provide treatment to patients with end stage renal disease; to provide for an independent review by the Kidney Disease Advisory Committee to assess the training and common practices of acute hospital based and free standing dialysis facilities and to make recommendations regarding the safety of patients with end stage renal disease; to provide for related matters; to repeal conflicting laws; and for other purposes.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

**SECTION 1.**

Title 31 of the Official Code of Georgia Annotated, relating to health, is amended by inserting immediately following Chapter 16 a new Chapter 16A to read as follows:

"CHAPTER 16A

31-16A-1.

This chapter shall be known and may be cited as the 'Ray Biddie and Gene Mullis Act.'

31-16A-2.

As used in this chapter, the term:

(1) 'End stage renal disease' means that stage of renal impairment that appears irreversible and permanent and that requires a regular course of dialysis or kidney transplantation to maintain life.

(2) 'Physician' means an individual who is licensed to practice medicine under Article 2 of Chapter 34 of Title 34.

(3) 'Registered nurse' means an individual who is currently licensed as a registered professional nurse in this state pursuant to Article 1 of Chapter 26 of Title 34.

31-16A-3.

(a) Any initiation and monitoring of hemodialysis treatments for a patient with end stage renal disease shall be performed by a registered nurse under the direct supervision of either:

(1) A board certified physician in nephrology; or

(2) A board certified physician in internal medicine that is skilled in renal and related disease procedures.

(b)(1) Assessment of a patient with end stage renal disease shall be performed by a registered nurse under the direct supervision of either:

(A) A board certified physician in nephrology; or

(B) A board certified physician in internal medicine that is skilled in renal and related disease procedures.

(2) Assessment of a patient with end stage renal disease shall include industry standard practices and shall include exhaustive evaluation of the patient's access. Any deviation indicating possible infection shall be treated with stringent measures to prevent patient complications, including death of the patient.

(c) A methodology shall be established to document and track patient infections and follow-up procedures to prevent patient complications, including hospitalization and death of the patient.

31-16A-4.

Prior to initiating, providing, and monitoring hemodialysis treatments, a registered nurse shall undergo extensive training which shall include, at a minimum:

(1) Basics of water treatment for dialysis and the associated risks and hazards;

(2) Complications that result from improperly treated water used for dialysis;

(3) Patient signs and symptoms that result from improperly treated water used for dialysis;

(4) Emergency preparedness training in responding to patient signs and symptoms that result from improperly treated water used for dialysis;

(5) Procedures used in water treatment and in dialysis equipment and ancillary supplies to recognize and respond to chemical exposures, which may lead to harm or death to a patient with end stage renal disease;

(6) Microbiology of water and dialysate used for dialysis to be able to recognize and respond to exposure to bacteria and endotoxin that may lead to harm or death to a patient with end stage renal disease;

(7) Basics of dialysis equipment function beyond treatment provision to be able to recognize and respond to situations that may lead to harm or death to a patient with end stage renal disease;

(8) Basics of fluid dynamics and the process of toxin and water removal by the dialyzer to be able to recognize and respond to situations that may lead to harm or death to a patient with end stage renal disease;

(9) Basics of dialysate composition, production, and standards to be able to recognize and respond to situations that may lead to harm or death to a patient with end stage renal disease;

(10) Preparation of equipment and ancillary devices used for dialysis, including the dialyzer, to be able to recognize and respond to situations that may lead to harm or death to a patient with end stage renal disease; and

(11) Process of dialyzer reprocessing standards, if applicable, to be able to recognize and respond to situations that may lead to harm or death to a patient with end stage renal disease.

31-16A-5.

The Kidney Disease Advisory Committee established pursuant to Code Section 31-16-3 shall undertake an independent review to assess the training and common practices of acute hospital based and free standing dialysis facilities and to make further recommendations on the training levels of medical professionals and the safety of patients with end stage renal disease. The advisory committee shall:

(1) Review infection rates reported to the Centers for Disease Control and Prevention and to the regional renal network organizations;

(2) Review specific guidelines developed for diagnosis, treatment, monitoring, and reporting of infections;

(3) Review training programs of facilities for adequacy and capability of registered nurses to perform and monitor hemodialysis treatments;

(4) Study the feasibility of the creation of regional training centers to be operated by industry professionals in the fields of nursing and dialysis technology and by biomedical specialists to:

(A) Provide the basic educational requirements necessary to provide and monitor dialysis treatments; and

(B) Provide education and assistance for related disease modalities to delay or prevent the onset of end stage renal disease; and

(5) Review the costs to medicare for all new onsets of end stage renal disease."

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- SECTION 2.
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- All laws and parts of laws in conflict with this Act are repealed.